

UNFPA BANGLADESH ANNUAL REPORT 2020

Progress and Highlights



Ensuring rights and choices for all since 1969



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FOREWORD

Globally, 2020 tested our resilience and agility and stretched our limits.

Bangladesh, one of UNFPA's largest operations was not an exception. In addition to COVID, the disruptor, we held one of the world's largest and most complex humanitarian refugee responses, were repeatedly tried by multiple climate-change provoked disasters, all the while seeking to serve to ensure no preventable maternal deaths, no unmet need for family planning, and no incidents of gender-based violence.

It is with this pride and appreciation for our courageous and dedicated staff, partners, and supporters, that I share with you the UNFPA Bangladesh Annual Report 2020. The report clearly demonstrates the progress made towards achieving the results outlined in our 9th Country Programme, while ensuring a timely response to the pandemic in line with the Bangladesh Preparedness and Response Plan towards COVID-19, as well as our continued support to humanitarian emergencies in 2020.

Our team forwarded UNFPA's mandate and mobilized resources in their pursuit under unprecedented circumstances, with compromised supply chains and delivery challenges, and efforts to protect and keep staff safe whilst ensuring business continuity.



Through the challenges, we have learned to embrace change in all its forms, by organically unleashing our creativity and innovation within us to ensure our work continues, keeping a laser-sharp focus on our end destination. We have remained true to our mission as the UN's sexual and reproductive health agency by continuing to ensure pregnant women have safe deliveries, that women and young people continue to uphold their sexual and reproductive health and rights with access to family planning commodities, and expanding women's and girls safety from the 'shadow pandemic' of gender-based violence. We have also worked to ensure that young people have access to life-skills and psychosocial support despite the closing of education facilities, and that policy-makers continue to be guided by new evidence, projections, and population data to ensure that no one is left behind.

As much as crises unmask pre-existing vulnerabilities, it also unraveled our shining capacities. We were able to draw on the usual resilience and agility of our 180-person, brave, strong and diverse team, to deliver and overcome the complex challenges, allowing us to harness individual talents as well as collective genius.

Together we could draw on and expand partnerships, with the Government, the UN family, Civil Society, and other partners to thrive and grow resources.

We were able to integrate ICPD commitments in the multiple Government and UN coordination spaces and commitments, further solidifying our role as a key health sector player with a laser-sharp focus on the most vulnerable. We sought innovative ways to deliver, engage in partnerships, and secure substantive funding in the coming years.

Throughout 2020, UNFPA has been at the tables, and on the virtual screens, providing leadership around our issues, tirelessly educating, negotiating, and bringing solutions for protection, healing and life saving and advocating for the underserved.

Looking back, I am humbled and grateful about our contribution under uncertain circumstances.

I express gratitude to our counterparts, implementing partners, and development partners and thank you for standing by us, enabling our life-saving work.

We will continue to do our best and tirelessly serve until all pregnancies are wanted, all childbirths are safe, and every woman and girl can harness her full potential.

Thanking you,
ধন্যবাদান্তে,

Dr Asa Torkelsson
UNFPA Bangladesh Representative



SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

Ever since its founding, UNFPA has worked to build a world, where every person has access to sexual and reproductive health services and where no one is deprived of their sexual and reproductive rights. At the core of our mandate is achieving zero maternal deaths and zero unmet need for family planning around the world by 2030. With UNFPA's support, Bangladesh has continuously improved the quality and availability of maternal health, family planning and other essential sexual and reproductive health services in the country over the past decades.

In 2020, the COVID-19 pandemic posed a challenge to the progress Bangladesh has made in achieving universal sexual and reproductive health and rights. By devising innovative solutions and taking collective action with the Government and our other partners, UNFPA was able to ensure a timely response to the crisis and maintain the availability of sexual and reproductive health services for vulnerable communities around the country.

OUR RESULTS IN 2020

Midwifery

Ensuring a safe birth for every pregnant woman everywhere is not possible without the life-saving work performed by midwives. For years, UNFPA has worked to improve the training and availability of midwives in Bangladesh. Despite the challenges posed by COVID-19 in 2020, UNFPA continued to train, deploy and advocate for the importance of using midwifery services around Bangladesh.



320 surge midwives were sent to over 70 district and sub-district hospitals to meet the demands on nursing care for COVID-19 patients

- In 2020, UNFPA ensured that midwifery education continued online and that both the faculty and students learned how to deliver and receive education remotely. A PSC examination was held on 28 December 2020 to deploy 1,714 midwife graduates to government health facilities. Future deployment of up to 5000 midwives has been approved and another 25,000 are in the process of being approved by the government.
- In 2020, The National Midwifery Action Plan (2021-2025) was developed and endorsed by the Directorate General of Nursing and Midwifery (DGNM). The policy was developed to create a positive environment for midwifery governance, leadership and evidence based practices.
- Relicensing Guideline for midwives was updated with new criteria demanding continuous professional development before relicensing every 5 years. Standard Operating Procedure (SOP) for midwifery services was also revised and translated into Bengali.
- UNFPA supported midwifery bachelor's and master's courses were approved by the Ministry of Health and Family Welfare and will begin in 2021 and 2022. The participation of Bangladeshi midwives in an SRHR master's program provided by Dalarna University also continued remotely in 2020.

- Many of the newly graduated midwives were seen by other health workers as nurse assistants rather than as health professionals with their own particular expertise. To respond to these concerns, UNFPA supported mentoring of the midwives' managers and other maternity staff in over 100 hospitals around the country.
- The existing urban medical college hospital midwifery services expanded to include separate delivery areas for mothers with COVID-19. In addition, the percent of deliveries performed by midwives increased significantly. Improvements in the quality of maternal care continued to also be seen, including increased skin to skin contact and reduced use of oxytocin.
- 320 surge midwives were sent to over 70 district and sub-district hospitals to meet demands on nursing care for COVID-19 patients. In the hospitals where midwives were sent, the delivery rates have recovered much more rapidly compared to the rest of the nation.

Emergency obstetric and newborn care

A delivery can be deadly if it is not performed in the presence of a skilled birth attendant. A post-partum haemorrhage can kill a woman in less than two hours and even less severe complications usually require emergency care within 6 to 12 hours. In 2020, UNFPA continued to improve the availability of skilled birth attendants to ensure complications threatening the health and lives of women and newborns are identified in time.

- In 2020, a total of 1184 pregnant women at risk were identified in 14 districts and referred to higher level facilities for improved care. Furthermore, UNFPA supported the government in ensuring standard emergency obstetric and newborn care services by deploying roving midwives and maternity ward staff with Infection Prevention and Control (IPC) training to vulnerable communities.
- In collaboration with UNFPA field staff, DGHS and OGSB provided training to 1,173 health service providers on triage and maternal care and Infection Prevention and Control (IPC) at 10 medical college hospitals and CP9 targeted district hospitals.
- In 2020, PPH and eclampsia boxes with essential items were delivered nationwide to all 64 district hospitals and 430 UHCs. In addition, ambubags, goggles, gloves and reusable face masks were delivered to ensure safe emergency obstetric and newborn care during COVID-19.

- UNFPA supported the government in ensuring the availability of life-saving drugs in all target health facilities. As a result of these continued efforts, all target upazila health complexes are reported to have been able to provide EmONC services without any stock outs of life-saving drugs in the last 6 months of 2020.
- Care received for postpartum hemorrhage increased by 88% and 162% for eclampsia in mentored sub-district hospitals. This is notable as rural hospitals are often reluctant to provide critical care to obstetric patients, which creates both a health and rights issue as these are leading causes of death for women.

Family Planning

Every woman should have the ability to choose how many children she will have. Societies where women have access to family planning show better outcomes in gender equality and women's empowerment, which is why improving the availability and quality of family planning services is one of UNFPA's key priorities in Bangladesh. Unfortunately, our family planning programme was seriously disrupted by the COVID-19 pandemic in 2020, with many of our planned activities being suspended or postponed between March and August.

- To address disruptions, the Ministry of Health and Family Welfare (MoHFW) and UNFPA formed a Family Planning Task Force consisting of experts, researchers, academia, development, and I/NGO representatives to identify strategic priorities and support for implementation of proposed interventions. The Task Force recommended interventions to strengthen the continuity of FP as essential services during COVID-19 pandemic, of which many were implemented by the end of 2020.



All targeted Upazila Health Complexes were reported to have been able to provide emergency obstetric and newborn care services without running out of life-saving drugs in the last 6 months of 2020

- With UNFPA's technical support, the existing training and SBCC materials were reviewed by a disability-focused working group of DGFP. Furthermore, a Standard Operating Procedure (SOP) for health care providers was developed to ensure comprehensive SRHR services including family planning for people with disabilities and inclusion of disability related activities in Operational Plan of 4th HPNSP.
- In 2020, UNFPA organized the 5th National Youth Conference on FP, providing a platform for development partners and the government to discuss the challenges COVID-19 poses in ensuring young people's access to FP with over 500 youth from all over Bangladesh.
- Due to UNFPA's and the Government's continuous efforts to maintain and monitor the stock status of FP commodities, 99% of Upazila Health Complexes (UHCs) did not run out of modern FP contraceptives in 2020.



A total of 338,447 patients were reached with family planning methods during the nationwide family planning service campaign week supported by UNFPA

- A total of 338,447 patients were reached with family planning methods during the UNFPA-supported nationwide family planning service campaign week in 2020. Periodic FP client fairs focusing on intensive interpersonal communication (IPC) were also organised to generate demand for FP services.

Obstetric Fistula

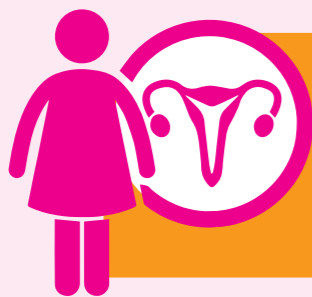
Obstetric fistula is a child birth injury caused by obstructed labour, which results in a hole between the birth canal and bladder or rectum. When left untreated, fistula causes chronic medical problems, such as leaking urine and faeces, which in turn makes survivors prone to depression, social isolation and poverty. By improving the availability of medical treatment and providing livelihood opportunities for fistula survivors, UNFPA aims to end fistulas in Bangladesh and support the reintegration of survivors into society.

- In 2020, the Government of Bangladesh and UNFPA launched their “Elimination of Fistula” programme in three districts of Rajshahi Division. The programme currently covers 4 divisions and has 20 fistula corners operating in district hospitals. A total of 411 fistula cases were identified in these health facilities in 2020, of which 353 were referred for management in higher facilities and 293 were surgically repaired.
- Despite the challenges posed by COVID-19, UNFPA continued to provide rehabilitation and reintegration support for fistula survivors. For example in Rangpur division, fistula survivors were trained to sew three-layer cloth masks and make jute handicrafts to help their reintegration into society.
- In 2020, DGHS declared 2 upazilas in Panchagarh district as fistula free and published an annual report on fistula for the first time in Bangladesh.

Cervical Cancer

Despite being largely preventable through timely vaccination and screening, cervical cancer is a leading cause of death among women worldwide. UNFPA aims to eliminate cervical cancer in Bangladesh by strengthening the availability of preventable care around the country and improving patients’ access to quality treatment.

- In 2020, a total of 109,951 women were screened for cervical cancer in 39 districts. Of these women, 3,778 were found to be VIA positive and some of them have already received follow-up colposcopy and further pre-cancer treatment.



A total of 109,951 women were screened for cervical cancer in 39 districts.

- To support medical colleges and training centers in training medical professionals, UNFPA spearheaded the development of the national cervical cancer screening and pre-cancer management curriculum both in English and Bengali. A training guideline and checklist on Visual Inspection by Acetic Acid (VIA) was also developed and approved by the Directorate General of Health Services (DGHS).
- DGHS also issued a government order that instructed all UHCs to screen 200 women and all DHs to screen 300 women for cervical cancer each month. In addition, 20 cervical cancer field mentors were supported by UNFPA assisted nurses and midwives in conducting regular VIA screening camps to build awareness and revamp screening services.
- As per data and information management, UNFPA supported DGHS MIS to establish a cervical cancer e-tracker, which enables tracking patients as they move from VIA screening centres to colposcopy clinics and treatment centres. In addition, UNFPA supported DGHS in training 256 service providers from 25 districts in properly documenting and managing data related to cervical cancer by using the national DHIS2 system.

HIV and STIs

While Bangladesh has a low prevalence of HIV/AIDS, low rates of condom use and poor awareness of HIV/AIDS and sexually transmitted infections (STIs) creates a risk for their spread in the country. By strengthening STI services and raising awareness on safe intimate practices, UNFPA aims to ensure that rates of HIV and STIs remain low in the country.

- A total of 2,622 women were screened for STIs, of which 1,280 were treated in 19 district hospitals. In addition, 4,423 female sex workers were provided integrated SRHR and HIV services in eight brothels and 2,552 transgender and gender diverse populations received STI/HIV screening and treatment in Cox’s Bazar.
- UNFPA supported the government in strengthening STI services in public and private health facilities through advocacy in 16 districts. In addition, a Bangla training module on STI management was developed for healthcare professionals. UNFPA also supported the development of an information management system for STI-service record-keeping and integrating information within the national DHIS2 system.

- A pool of 33 Master Trainers from 10 districts were developed who will conduct training sessions for healthcare providers on the management of STIs. UNFPA also played a supporting role in educating 78 private medical practitioners from 4 districts on the newly revised National STI management guideline.

Health Sector Response to GBV

The health sector has a huge role to play in the effort to end gender-based violence in Bangladesh. As most women are likely to visit a health facility at some point in time, the health sector is in a position to identify survivors of gender-based violence, provide them with immediate medical and psychosocial support, and refer them for any other support they may need.

- In 2020, with the technical support of UNFPA, the Health Economics Unit reviewed and updated the web-based Clinical Management of Rape (CMR) training module in Bangla and uploaded it on its website. As a result of the UNFPA's continued advocacy, the MOHFW also issued directives to ensure a health sector response to GBV at district and sub-district levels.

COVID-19 response

From the outset of COVID-19, UNFPA supported the Government of Bangladesh in strengthening its response to the pandemic and helped it to maintain the availability of SRHR services in vulnerable communities around the country.

- UNFPA was selected by the World Bank and Government as a Responding Agency for the World Bank's Pandemic Emergency Financing Facility. This fund, along with generous support from FCDO, enabled UNFPA to provide critical support to the government's COVID-19 response through the development of national guidelines and training modules, capacity building of health care providers, deployment of 872 service providers, improvement of WASH and medical waste management practices in health facilities and supplying of PPE and other medical equipment.

- As a result of UNFPA supported mentorships, a number of indicators related to COVID-19 improved in sub-district hospitals. For example, triages at facility entrances increased from 15% to 69% and separate delivery rooms for COVID-19 symptomatic mothers were expanded from 37% to 86% of hospitals. By the end of the year, 100% of hospitals also had masks and gowns available to them. The appropriate use of PPE and the knowledge of PPE among service providers was increased from 37% to 88% and 28% to 84% respectively.
- UNFPA participated in the Community Support Team (CST) initiative to reduce community transmission of COVID-19 through syndromic surveillance and quarantine. To support home-based management of COVID-19 patients and improve their referral to essential health services, a pool of CSTs composed of community health workers and local volunteers were trained to make household visits in search of probable COVID-19 cases. In addition, the CSTs also identified pregnant women from households and referred them to telemedicine services provided through the Bangladesh Midwifery Society.



I am so happy to be able to financially contribute to my family

- Marina, 47, Rangpur Division



“When I developed a fistula after the delivery of my sixth child, I felt so alone and stressed. Because of the foul smell caused by the disease, nobody wanted to come and meet me. Even my own family members could not tolerate it! Fortunately my husband stayed with me as we had to take care of the children.

Then one day, I met a government health worker who told me that my condition could be cured through a surgery. After some time, I was finally able to have it and recover from this devastating illness.

After the surgery, I received a sewing machine and sewing training. Now I am making cloth masks to stop the spread of COVID-19 and earn around 2,500tk per month. I am so happy to be able to financially contribute to my family again.”

Fistula survivors continue to suffer from stigma and discrimination in Bangladesh. UNFPA strives to ensure their dignified reintegration into society by providing these women with livelihood opportunities and raising awareness for the struggles they face.

In 2020, UNFPA together with our partner, LAMB Institute, provided training for fistula survivors in Rangpur Division to sew and sell their own cloth masks. The initiative allowed the women to gain financial independence amidst the pandemic, while also contributing to combat COVID-19 and regaining respect from their communities.



GENDER

Gender equality does not only benefit women, but everybody in society. When women have an equal opportunity to unleash their potential and contribute to their communities, a country is more likely to overcome poverty and other issues that hinder its development. Unfortunately in Bangladesh, women continue to face many obstacles to fully participating in public affairs, which shows in their lower socioeconomic status and high vulnerability to gender-based violence and other harmful practices.

In 2020, the COVID-19 pandemic further increased the vulnerability of women and girls to gender-based violence and other dangers. Through our joint efforts with the Government and our partners, we aimed to ensure that survivors of gender-based violence continued to have access to both legal and medical support and that GBV protection and response services were able to adapt to the security restrictions in place that limited the mobility and autonomy of women around the country.

OUR RESULTS IN 2020

- In 2020, UNFPA supported the Ministry of Women and Children Affairs (MoWCA), concerned ministries, and stakeholders to develop the costed annualized results framework of the National Action Plan on Violence against Women and Children (2018-2030). The costed plan will help the MoWCA with a strategic direction for future planning, identifying resource gaps and allocating resources accordingly, and monitoring and measuring the progress of the implementation of the national plan of action (NAP-VAWC).
- Bangladesh Police integrated Standard Operating Procedures (SOP) on women-friendly police services in the training curriculum of the Police Training Center. The module is used to train Police Sub-Inspectors, and thus they will be able to provide women-friendly services for GBV survivors in the police station.



12,090 survivors of gender-based violence received support from 31 UNFPA-supported Women Help Desks in police stations around Bangladesh

- UNFPA supported the Department of Inspection for Factories and Establishments (DIFE) to build the capacity of 115 Labor Inspectors on the revised rules and policies in which GBV and SRHR issues were integrated. According to the post-test assessment, about 80% of the labor inspectors reported increased knowledge of Bangladesh's labor rules. As a result, five Ready-Made Garments (RMG) factories received GBV and SRHR related recommendations to improve the quality of labor standards at the workplace.

- The Bangladesh Police, with UNFPA's technical support, trained 130 (40 female, 90 male) police officials from four target districts (Jalampur, Patuakhali, Bogura, Cox's Bazar), and Dhaka Metropolitan City to implement the Standard Operating Procedures (SOP) for Women Help Desks in police stations.



11,595 men and boys were actively engaged in UNFPA's GBV prevention initiatives in four target districts

- UNFPA supported MOWCA to keep 122 local NNPCs (VAW Committee) functional despite the challenges posed by COVID-19. These committees were very active in eliminating child marriage at the local level and thus contributed to preventing 54 child marriage cases in 2020.
- UNFPA implemented remote GBV case management and referral mechanisms and developed a training package, which was used to train 150 GBV actors on the health response to GBV. UNFPA also trained 917 frontline service providers on referral pathways, psychosocial first aid, mental health, and psychosocial support (MHPSS).
- In 2020, 3,439 women and girls were reached with multi-sectoral referral services. Furthermore 9,793 GBV survivors received medical, psychosocial, and legal services in four target districts. In addition, information on the availability of GBV services was provided to 587,260 women and girls through a community outreach program at a local level.



587,260 women and girls were informed about the availability of GBV services through UNFPA's community outreach program

- In 2020, 12,090 survivors of gender-based violence received support from 31 UNFPA-supported Women Help Desks in police stations around Bangladesh. According to a cell phone survey conducted in 2020, about 73% of the respondents claimed they were satisfied with the services they received at these Help Desks, which was an 11% increase from the baseline in 2017.
- Despite the closure of the court for more than three months and restrictions on movement due to the COVID-19 pandemic, a total of 1,034 survivors received justice and legal aid from four Court Help Desks (CHD) in four district court premises in 2020.
- UNFPA played a supporting role in drafting an advocacy and social behavior change communication plan for GBV prevention. A total of 11,595 men and boys were actively engaged in GBV prevention initiatives in four target districts in the year 2020. UNFPA also developed a virtual training module on MHPSS for the existing UNFPA helpline "Alapon", which was utilized to provide MHPSS services to adolescent boys and girls during the COVID-19 pandemic.



In 2020, UNFPA trained 917 frontline service providers on referral pathways, psychosocial first aid, and mental health and psychosocial support

- In 2020, UNFPA also successfully implemented the CERF Anticipatory Pilot Project in three severely flood-affected districts in Bangladesh by distributing Dignity kits, Menstrual Hygiene Management kits and Reproductive Health kits to the communities most affected by the floods. In the aftermath of Cyclone Amphan, UNFPA also distributed 22,865 dignity kits to the most vulnerable women and girls in eastern and northern parts of Bangladesh. In general, UNFPA led the GBV coordination at the national level and served as a multi-stakeholder coordination platform at both the national and sub-national levels in humanitarian contexts.



I feel motivated to make the world a better place with women's rights and gender equality at its foundation

- **Nusrat, Case Worker for Women's Protection and Empowerment, Cox's Bazar**



"The services we provide for survivors of gender-based violence here in the health facilities of the Rohingya camps will not stop for the COVID-19 pandemic. Despite limited movements, we continue to work, because our support to survivors is an essential service.

Personally, my work revolves around providing psychosocial support to the women that visit us. When COVID-19 began, I managed cases over the phone, but it was challenging. I realized that face-to-face interactions give women more confidence. When the community trusts the volunteers and case workers and truly feel that the health facility is a safe and confidential space to talk in, they visit us.

Despite the occasional challenges, I love my work. The inspiration comes from the survivors themselves who instill in me the courage and strength to move on. On my darkest of days, I see them having so little yet still finding the inner strength to look for solutions. Thanks to them, I feel motivated, energized and willing to continue my work to make the world a better place with women's rights and gender equality at its foundation."

Throughout 2020, the UNFPA-supported health facilities in the Rohingya camps and in the surrounding host communities in Cox's Bazar, provided life-saving information to survivors of gender-based violence, in addition to sexual and reproductive health services that ensured that women continued to deliver babies safely despite COVID-19.

Due to mobility restrictions during the pandemic, women and girls are at a heightened risk of health complications and violence. Ensuring that survivors have continued access to sexual and reproductive health services, together with gender-based violence response services, is critical to overcome the 'shadow pandemic' of increased violence against women and girls.



ADOLESCENTS AND YOUTH

The future of Bangladesh depends on its youth and adolescents. In order to become responsible leaders of tomorrow's Bangladesh, the country's young people must be able to cultivate healthy human relationships and make informed decisions regarding their sexual and reproductive health. For years, UNFPA has worked with the Government to increase the availability of life skills education and mental health and psychosocial support services for young people from vulnerable communities around Bangladesh. We also work together to ensure that Bangladesh's schooling system provides youth comprehensive education on sexual and reproductive health and rights issues throughout their academic career.

With schools staying closed for much of the year as a result of the ongoing COVID-19 pandemic, our efforts to educate the youth and adolescents of Bangladesh were undoubtedly compromised in 2020. However, by employing innovative virtual and remote solutions, we were able to ensure that the country's young people continued to have access to information on sexual and reproductive health and rights, as well as counseling services to cope with the unprecedented stress and anxiety caused by the pandemic.

OUR RESULTS IN 2020

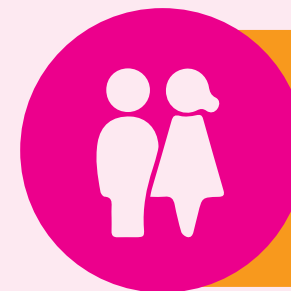
Adolescents Health

For Bangladesh to have a bright future, its young people need to be in good physical and mental health. Sadly, the ongoing COVID-19 pandemic has resulted in unprecedented mental stressors for the country's youth and adolescents. Throughout 2020, UNFPA aimed to provide support to young people around Bangladesh to ensure they were able to overcome the stress and anxiety caused by the unpredictable circumstances.



In 2020, UNFPA trained 30 health service providers and 6,434 adolescent leaders on providing adolescent-friendly health services

- For the first time ever, the Ministry of Youth and Sports (MoYS) produced a report on the 'Youth Development Index' in Bangladesh, which provides a geographical, age-wise, and social group-wise data trend analysis on youth participation, employment, and opportunities, which can be used to formulate equitable development planning for adolescents and youth in the country.
- Through the Alapon helpline, UNFPA managed to provide both counseling and information on Sexual Reproductive Health (SRH), Gender-based Violence (GBV) and COVID-19 to 17,709 adolescents in 2020. In addition, UNFPA expanded the available helpline services by deploying 7 newly trained counselors and by adding a port for remote mental health and psychosocial support (MHPSS) services to respond to emerging needs caused by the COVID-19 pandemic.



Through the Alapon helpline, UNFPA provided counseling and information on SRHR, GBV and COVID-19 to 17,709 adolescents around the country

- More than 1,000 youth were reached through community-based campaigns organized by the Department of Youth Development (DYD) on the availability of health, education, and ITC services at the five Targeted Youth Training Centers.
- In 2020, 6,434 adolescent leaders were trained on adolescent-friendly health service provision, GBV, and COVID-19.

Life Skills Education

Life skills education is crucial to ensuring that young people in Bangladesh are capable of cultivating healthy human relationships and coping with life's challenges in a responsible manner. Despite the challenges posed by COVID-19 in 2020, UNFPA continued to provide life skills education to youth and adolescents around the country in different modalities.

- In 2020, UNFPA provided technical inputs to develop a curriculum framework for the overall national curriculum development which includes life skills education. Furthermore, a total of 80 curriculum experts were trained on "Gender Transformative Approach to Curriculum Revision."
- As a result of UNFPA's continued advocacy, a total of 285 education institutions are now teaching gender-responsive life skills education in Bangladesh. The Directorate of Secondary and Higher Education has also broadcasted 15 gender transformative life skills (GEMS)* sessions through national television during the COVID-19 pandemic.
- In 2020, UNFPA provided support to the government to build the capacity of teachers on Life Skill Education (LSE) in six target districts. A total of 810 teachers were provided a 5-day on training on GEMS, which is a gender transformative life skills education curriculum developed by UNFPA for early adolescents. Following the training, they demonstrated an increase in their knowledge and skills on LSE and are now offering LSE teaching in 280 schools and madrasas.

*GEMS is the gender transformative life skills education curriculum for early adolescents developed by UNFPA

- During the reporting period, 30,000 DVDs of UNFPA's educational Shahana Cartoon Series were distributed in all 64 districts of the country. According to the Government's instructions, the cartoon series is to be shown to students in every school across Bangladesh. In addition the GEMS Manual, GEMS Diary, and GEMS register were distributed to 289 schools and madrasas in the country.



30,000 DVDs of UNFPA's educational Shahana Cartoon Series were distributed in all 64 districts of the country

- Life skills and SRH education was also virtually provided to young people through Sangsad TV and Alapon Live sessions. In total, the Alapon Live sessions reached more than 421,000 views on social media.

Child Marriage

More than half of the girls in Bangladesh are married before the age of 18. After marriage, child brides often quit school and are restricted to the domestic sphere for the rest of their lives, which seriously hampers the ability of girls to unleash their potential and fully contribute to their communities. With the ongoing COVID-19 pandemic making girls exceptionally vulnerable to child marriage, UNFPA continued its efforts to combat the harmful practice in 2020.



954 community stakeholders were engaged in community meetings to end child marriage in Bogura and Jamalpur districts

- In 2020, the Ministry of Women and Children Affairs (MoWCA) developed a district-level plan to address child marriage through district-level Committees on the Prevention of GBV and Child Marriage that have been created in target areas based on the approved National Action Plan to End Child Marriage.
- With the support of UNFPA, the Department of Women Affairs (DWA) of the Ministry of Women and Children Affairs (MoWCA), developed a guideline on community engagement during the COVID-19 pandemic which was used to engage a total of 954 community stakeholders in community meetings to end child marriage in Bogura and Jamalpur districts. MoWCA also disseminated the findings of the midline child marriage survey 2020 among the local administration and relevant stakeholders.
- UNFPA also supported the Department of Women Affairs in developing a handbook for adolescent girls to support learning during the COVID 19 pandemic. Although adolescent girls clubs were closed due to the COVID-19 pandemic, 36 gender promoters conducted remote outreach to a total of 3,000 adolescent girls virtually, providing them with information on COVID-19 and self-care during the pandemic.
- In addition, 122 anti-sexual harassment committees in secondary schools were functional. Following the High Court Directive against Sexual Harrassment, a total of 510 stakeholders including senior officials of the local administration were also engaged in discussions to protect girls against child marriage and other harmful practices.



The most satisfying part of my job is interacting with adolescents and helping them overcome the challenges they face during puberty

- Mira, 31, Alapon helpline counselor



"My name is Mira. I have been working as a counselor for the Alapon helpline for one year now.*

In my experience, the most common reason young people call the Alapon Helpline is to ask questions relating to their sexual and reproductive health. Wet dreams, menstruation and masturbation are some of the common topics. During COVID-19, many young people were also concerned about sanitation and hygiene, as well as the symptoms they were experiencing.

The most satisfying part of my job is interacting with adolescents and helping them overcome the challenges they face during puberty. This makes me feel so proud of myself!"

The 'Alapon' helpline is a UNFPA-initiative, delivered in partnership with CWFD (Concerned Women for Family Development), and endorsed by the Ministry of Education, which provides young people access to counsellors to guide them as they transition from adolescence to adulthood.

Throughout the COVID-19 pandemic in 2020, the 'Alapon' Helpline continued to provide remote counseling services to young people between the ages of 10 and 24 across Bangladesh. The helpline was available 7 days a week, 12 hours a day and received thousands of calls from young people and parents that sought advice from professional counselors for their concerns about mental health, gender-based violence, sexual and reproductive health and rights, and COVID-19.

*The name of the person has been changed to protect her identity



POPULATION DYNAMICS

Accurate data about population dynamics is crucial for a country's development. Without an accurate picture of population trends and dynamics, it is difficult to allocate resources in an efficient manner and to ensure that investments made in public services are sufficient in meeting the needs of the communities they are meant to support. By collecting demographic information through surveys and censuses, UNFPA aims to make provisions for generating disaggregated data on population dynamics.

In 2020, the importance of timely demographic data was highlighted by the COVID-19 pandemic. In circumstances, where limited resources were available for meeting the suddenly increased needs of the people, the Government and UNFPA worked together to rapidly collect information that enabled us to prioritize the needs of the most vulnerable communities in our COVID-19 response. Furthermore, we continued to collect data to protect people from the effects of climate change and host policy dialogues to review the efficiency of our previous and ongoing efforts to support the people of Bangladesh.

OUR RESULTS IN 2020

- After continuous negotiation efforts by UNFPA, a population and development section was incorporated into the 8th Five-Year Plan (2021-2025) of Bangladesh. UNFPA also ensured the inclusion of all key indicators in the revised SDGs' Monitoring and Evaluation Framework, which is currently being used by the government for tracking and reporting SDG indicators.



As a result of UNFPA's continuous advocacy efforts, a population and development section was incorporated into Bangladesh's 8th Five-Year Plan (2021-2025) for the first time

- UNFPA supported the Bangladesh Bureau of Statistics (BBS) in producing geo-coded digital small-area maps of nine disaster-prone districts in Bangladesh (Barishal, Bhola, Pirojpur, Barguna, Patuakhali, Jalokathi, Noakhali, Feni, and Laxmipur). The map included 2011 Census population data, geo-codes of all administrative units of the districts, and the risks and vulnerabilities in the areas which are being referred for local-level humanitarian response planning and preparedness.
- UNFPA provided the BBS with technical support in using the REDATAM application for the dissemination of survey data. This has increased the availability of demographic data disaggregated by age, sex, and location for research and planning purposes. To date, 9 datasets on this platform are available and are accessible to external users for further spatial analyses of data.
- With UNFPA's technical support, the final draft of the long and short questionnaire for the 2021 Census was also prepared. The latest satellite images from the Center for Environmental and Geographic Information Services (CEGIS) are also being used to update data on enumeration areas, household listings, population densities, and health facilities to support the 2021 census. Furthermore, UNFPA has contributed to producing a total of 75,000 mauza-mahalla maps to support the 2021 Population and Housing Census.



UNFPA has contributed to producing a total of 75,000 mauza-mahalla maps to support the 2021 Population and Housing Census

- Eight thematic policy papers were produced in 2020 for policy advocacy and were referred to by policymakers in various forms during the development of the 8th Five-Year Plan of Bangladesh. The eight themes of these papers are: (i) Implications of the Emerging Demographic Profile for Bangladesh Development Strategy, (ii) Devising strategies and actions to attain the 3 Commitments Bangladesh Government made during ICPD25 about the 3 zeros, (iii) GBV: a challenge for reaching the SDGs, (iv) Effective use of Population Resources in Bangladesh for Inclusive Economic Growth and Income Distribution: An Application of National Transfer Accounts, (v) Analysis of the National Budget for the Health Sector to Advance the ICPD PoA, (vi) Strategic Framework and Action Plan to Reap the Demographic Dividend, (vii) Addressing high unmet need for FP, and (viii) Existing FP Policies and Guidelines in line with FP-2020.
- Five policy briefs were produced for advocacy at the national and local levels, which were used to make specific recommendations to the GED during the development of the 8th Five-Year Plan. The briefs provided an overview of the following issues: (i) COVID-19 Pandemic and its impact on RH and MCH services, (ii) Population density and vulnerability: a challenge for the sustainable development of Bangladesh, (iii) Active aging and healthy life expectancy in Bangladesh, (iv) Ending child marriage and reducing childhood mortality in Bangladesh, (v) Support and care towards the older population in Bangladesh.
- UNFPA produced five policy briefs using the results of in-depth secondary analyses under the 'Strengthening Parliament's Capacity in Population and Development Issues (SPCPD) project', targeting Members of Parliament (MP) and other relevant government decision-making bodies which are being used for the advancement of the ICPD agenda at local and national levels.
- UNFPA and the Dhaka University jointly organized an International E-Conference on Emerging Population Issues. At the conference, presenters from India, China, Australia, and Bangladesh, focused on pertinent topics relating to population issues such as human capital and the demographic dividend, migration, active aging, universal health coverage, and climate change and displacement.



UNFPA and Dhaka University jointly organized an International E-Conference on Emerging Population Issues with presenters from India, China, Australia and Bangladesh

- A perception study on COVID-19 was conducted in 25 selected Teagarden health facilities and findings were disseminated to inform program planning to address issues related to maternal health and family planning services during COVID-19. A mapping of the existing social protection services in the tea gardens was also conducted in 2020.



A perception study was conducted in 25 Teagarden health facilities to address issues related to maternal health and family planning services during COVID-19

- In collaboration with UNFPA, Bangladesh Parliament Secretariat (BPS) organized a virtual policy dialogue on the "Concerted Response to Stop Child Marriage, Prevent Gender-Based Violence and Improve Maternal Health during Natural Disasters and the COVID-19 Pandemic". As a result, the sub-committee on eliminating child marriage and preventing GBV in consultation with the law review committee reviewed the existing Domestic Violence (Prevention and Protection) Act 2010 and prepared a report which will be used in the consultation meeting with the Parliamentary Standing Committee on MoWCA to amend the Domestic Violence Act.

- UNFPA and BPS, in cooperation with local administration in Madaripur and Sirajganj districts organized two local level consultations on "Reducing maternal mortality by eliminating child marriage". Furthermore, three Members of Parliaments discussed the ICPD agenda in public meetings at local and national levels in Moulvibazar, Nagaon, and Gaibandha districts.
- The Panchagarh district administration, in collaboration with the Bangladesh Parliament Secretariat, organized a program titled "Konarato- our daughter, our assets". This helped school-going rural adolescent girls learn about reproductive health issues, the consequences of child marriage, and women's rights. Hon'ble Speaker of the Bangladesh Parliament, and UNFPA Representative were virtually present at the event.



Proper management of the population for development is about empowering women to have control over their reproductive health and reproductive decisions

**- Professor Dr. Shamsul Alam,
Senior Secretary, General Economic
Division, Ministry of Planning**



“Population growth and changes in population structure create both opportunities and challenges. In Bangladesh, we have a bulging youth population, which gives us the unique opportunity to reap a demographic dividend that can push us towards achieving increased economic growth and sustainable development.

To make sure Bangladesh is able to seize such opportunities, UNFPA supported the Government of Bangladesh in forming and operating a Population Expert Committee, which is helping to mainstream population issues into national development processes/plans in line with the ICPD PoA and SDG agenda by generating knowledge and evidence on critical population dynamics, particularly changing age composition and impacts on framing development policies. Our efforts in 2020 culminated in a population and development perspective being integrated into the new 8th Five Year Plan of the Government of Bangladesh.

Proper management of population dynamics for development is not simply about decreasing population growth, but about empowering women to have control over their reproductive health and reproductive decision making. It is about reducing risks and enhancing the quality of life for everyone from conception to old age.

I hope that as Bangladesh embarks on its journey to become an upper-middle-income country by 2031, population dynamics continue to occupy a central stage on the national development agenda in the years to come.”



HUMANITARIAN

In humanitarian contexts, the importance of access to quality sexual and reproductive health services, as well as protection from gender-based violence is often overlooked. However, pregnancies do not stop for disasters and lack of access to quality maternal care can easily result in life-threatening complications. In addition, limited privacy in emergencies often makes women and girls vulnerable to sexual abuse and other forms of violence. By actively participating in humanitarian settings in Bangladesh, whether it be in the Rohingya refugee camps of Cox's Bazar or in the aftermath of cyclones and flooding, UNFPA aims to ensure that SRHR and GBV response services remain available to those affected by humanitarian crises.

Despite the COVID-19 pandemic, UNFPA continued to take a leading role in humanitarian response efforts around the country in 2020. Our programme in Cox's Bazar continued to provide its comprehensive SRHR and GBV services to women, as well as youth and adolescents from the Rohingya camps and surrounding communities. Furthermore, we provided extensive support to those affected by the destruction caused by Cyclone Amphan and participated in a landmark Anticipatory Action Pilot Project funded by CERF to provide relief to communities in flood-prone areas before the disaster hit.

OUR RESULTS IN 2020

Cyclones and Floods

- In 2020, UNFPA distributed 22,865 Dignity kits to women, girls and transgender people affected by floods in Barguna, Gaibandha, Jamalpur, Khulna, Kurigram, Patuakhali and Satkhira districts in order to mitigate their risks of being subjected to gender-based violence in emergency situations.



UNFPA distributed 22,865 Dignity kits to women, girls and transgender people affected by floods in order to mitigate their risk of being subjected to gender-based violence

- 10,701 adolescent girls between the ages of 10 and 18 years received Menstrual Health Management Kits (MHMs) with information on menstrual health management and GBV referral mechanisms.
- 2,461 adolescent girls and boys affected by disasters received counseling and information about SRH related issues through the UNFPA-supported Alapon Helpline.



2,461 adolescent girls and boys affected by disasters received counseling and information on sexual and reproductive health the UNFPA-supported Alapon Helpline

- 3 district hospitals and 3 Upazila health complexes affected by floods in Kurigram, Gaibandha and Jamalpur districts were also equipped with Reproductive Health kit 3 for post rape treatment and Reproductive Health kit 2B for clinical deliveries. A total of 600 pregnant women were reached with clean delivery kits to ensure they had safe deliveries despite the emergency situation.
- 3,890 GBV survivors received Psychosocial Support (PSS) and Psychological First Aid (PFA) from trained GBV case workers. In addition, 1,146 women, of which 858 were pregnant and 288 were GBV survivors, received unconditional grant support amounting to 50 USD to ensure safe deliveries and/or legal aid support.
- 41,195 women and girls, including female sex workers and transgender people, received contextualized lifesaving information on GBV services. Moreover, 2,222 women and girls received lifesaving support through GBV referral pathway services.
- 62,929 people affected by floods received lifesaving information on SRHR, GBV, and PSS through megaphone campaigns, posters, community radio channels and cable TV.
- 7,706 pregnant, lactating mothers received maternal health care support from midwives who had been deployed by DGHS with UNFPA's technical assistance.

Rohingya Response

Sexual and reproductive health and rights

- In 2020, UNFPA continued to lead the SRHR Working Group under the umbrella of the Health Sector in Cox's Bazar. The working group successfully coordinated the necessary shift from the implementation of the minimum initial service package (MISP) to the provision of comprehensive SRHR services in all camps and settlements. This was achieved through ongoing technical support and coordination provided by UNFPA working together with the SRHR working group and Health Sector to build the capacity of all partners in delivering SRHR services. 28 different SRHR training sessions were conducted for 1,680 (Female: 1,438, Male 242) frontline health workers and managers, which were supported by the SRH Working Group.
- In 2020, a total of 333,979 women and girls visited facilities for family planning services in Cox's Bazar. Out of these visits, 142,509 were first time visits and 191,470 were revisits.



333,979 women and girls visited family planning services in Cox's Bazar

- UNFPA deployed 160 midwives to UNFPA supported health facilities and Women Friendly Spaces in Cox's Bazar. As a result, 70,789 visits for Antenatal Care (ANC) and 13,130 visits for Postnatal Care (PNC) were reported by women and girls from both the Rohingya and surrounding Host communities. 5,430 facility-based deliveries were also recorded, all of which were supported by professional midwives. The midwives also provided syndromic management of Sexually Transmitted Infections for 18,410 women and girls and menstrual regulation for 1,066 women and girls.
- In 2020, a total 5,672 women and girls were referred for emergency maternal health services, of which 3,260 were emergency obstetric referrals. Furthermore, in 22 UNFPA supported health facilities, a total of 1,689 women were screened for cervical cancer and the 14 who tested positive received treatment.
- 13,653 people, including 1,335 suspected/probable COVID-19 patients, received SRH services from the Maternity Red Zones/IPC Infection Prevention Control facility at the Hope Field Hospital for Women, which is supported by UNFPA. One additional woman, who was a suspected/probable COVID-19 patient, was also attended to at a Maternity Red Zone in another UNFPA supported health facility.
- UNFPA has been working with transgender community, gender diverse populations and sex workers in Ukhiya district, raising awareness on gender based violence during COVID-19, sexually transmitted infections, HIV testing, reproductive health and safe sex practices (by providing condoms for distribution and promotion for dual protection), as well as provided information on COVID-19 prevention, handwashing stations, mask production and use and ensuring social distancing.

Gender-based violence

- UNFPA is leading the GBV Sub Sector, comprising 39 partners – 18 INGOs, 15 NGOs, 5 UN agencies and 1 GOB Ministry. Its strategic objectives include expanding access to multi-sector GBV services, capacity building of GBV service providers and other stakeholders, enabling participation of affected populations, enhancing GBV response, prevention and risk mitigation, and strengthening coordination and planning for the sustainability of the GBV response. The GBViE Mental Health and Psychosocial Support (MHPSS) team conducted sessions on coping with stress during COVID-19 with 50 GBV case workers at the start of the pandemic.



Women and girls from the Rohingya and host communities continued to access GBV prevention and response services provided by UNFPA-supported Women Friendly Spaces

- All 23 Women Friendly Spaces (19 in camps and 4 in the host community) remained operational and open during the COVID-19 lockdown, providing lifesaving GBV services, including case management, COVID-19 information and referral services. Basic SRHR services, provided by midwives, were accessible in 19 of the 23 Women Friendly Spaces.
- UNFPA provided 39,240 dignity kits for vulnerable women and girls to ensure that they were able to take care of their personal needs and protect themselves from GBV amidst the crisis.
- Regular awareness raising sessions on gender-based violence, protection from sexual exploitation and abuse, COVID-19 and sexual and reproductive health and rights services were provided during the year and throughout the pandemic.

- 193 GBV case workers and case managers received training on Mental Health and Psychosocial Support (MHPSS) on topics including, Psychological First Aid (PFA), Psychosocial Support (PSS), basic skills and suicide prevention.
- UNFPA supported the initiation of “SASA! Together” ,which is a tested social change approach to address the power imbalance in society. was initiated. As a part of the effort, UNFPA completed a Community Assessment Survey in 13 camps and 4 surrounding host community areas during 2020.

Adolescents and Youth

- In 2020, 5,700 adolescent boys from 3 host communities from 2 upazillas, in Ukhiya and Teknaf, and 16 camps successfully completed the structured gender and SRHR focused life skills sessions provided by UNFPA. Following the completion of the programme, 5,700 micro-gardening kits were distributed to Champions of Change participants to enable them to start their own micro-gardens.
- A total of 13,250 young people (8,733 boys and young men: 3,981 girls and young women) and 4,720 caregivers took part in awareness raising sessions focusing on COVID-19 risk prevention and control. Furthermore, a total of 130 adolescent peer leaders were trained on COVID-19 risk communication, SRHR and gender-responsive life skills, and psychosocial support for adolescents and youth, after which they were deployed to support the COVID-19 response in the Rohingya refugee camps and immediate host communities.
- Under the leadership of UNFPA, the Youth Working Group localized the COVID-19 Working with and for Young People Practical Guide; developed and shared advocacy notes for increased youth programming and reduced barriers to accessing skill development opportunities for young people; and developed a snapshot of youth participation in the COVID-19 response in Cox's Bazar.



I learned a lot about menstrual health, safety from violence, and mental health issues through the flashcards

- Jerina, 15, Satkhira District



"During Cyclone Amphan, there was a lot of destruction in my community. River banks were eroded, trees were uprooted and houses were destroyed. My family's home was hit and even though my father was able to rebuild it, life has been difficult for us ever since.

With all of this going on, we were not able to discuss concerns about our physical and mental health with our family members. That's why these menstrual hygiene kits we received are so helpful to me and other girls in my community. They will help us take care of our hygiene and protect ourselves from different infections.

I also learned a lot about menstrual health, safety from violence, and mental health issues through the flashcards in the kits. I also know that I can protect myself from COVID-19 by wearing a mask and practicing social distancing. This information will help me for my entire life."

In September 2020, UNFPA, together with our partners, Plan International and CWFD (Concerned Women for Family Development) distributed 5,200 Menstrual Health Management Kits to girls between the ages of 10-18 years in districts affected by Cyclone Amphan.

The kits contained essential goods such as soap, detergent powder, sanitary cloths, and underwear. These items enable adolescent girls to take care of their personal hygiene, despite the natural disaster. In addition to the items, the kits also contained masks and flashcards with information on sexual and reproductive health, safety precautions to follow during COVID-19 and the hotline number of the UNFPA-supported 'Alapon' helpline, which provides young people remote counseling during the pandemic.



LEAVING NO ONE BEHIND

One of the core principles that guides all of UNFPA's work is "Leaving No One Behind." By this we mean that all development experienced by a country should be inclusive of its most vulnerable members and that the needs of the most deprived and marginalized should always be prioritized in our work. We also want to ensure that the voice of these vulnerable groups is heard when decisions affecting them are made and that they are empowered to become active participants in decision making processes themselves.

In 2020, UNFPA continued to support and work with multiple vulnerable groups around Bangladesh. In light of COVID-19, we ensured that people living in urban slums were able to stay safe from the pandemic and have access to essential sexual and reproductive health services in their own communities. We ensured that the special needs of persons with disabilities and transgender people were taken into account when providing emergency relief to communities affected by natural disasters. Furthermore, we continued our efforts to ensure the safety and dignity of sex workers on duty. All these initiatives were model examples of the leaving no one behind principle put in practice.

OUR RESULTS IN 2020

Urban Slum Dwellers

- To respond to the SRH needs of Dhaka's urban slum dwellers, UNFPA continued to support Dhaka Medical College Hospital and Mitford Hospital with midwifery-led maternal health care. In 2020, the hospitals performed 5,113 normal vaginal deliveries, managed 731 postpartum hemorrhages and 3,113 eclampsia cases, and oversaw 6,031 instances of skin-to-skin care.
- To give women from urban slums more power over their reproductive health, UNFPA supported the DGFP in expanding access to the DMPA Subcutaneous contraceptive, making injectable contraception more available in remote locations. In city corporation areas, 9,052 clients were provided with the contraceptive.



In urban slum areas, we reached a milestone in expanding family planning services by giving 9,0252 women access to the injectable MPA subcutaneous contraceptive

- To improve vulnerable women's access to emergency obstetric and newborn care services, UNFPA also designed and rolled out an innovative Android-based mobile app in 3 midwifery centers in slums around Dhaka. The mobile app is being used to establish a 24/7 referral platform that aims to reduce delays in women reaching hospitals in emergencies. During the reporting period, 427 normal vaginal deliveries were performed and 77 referrals were made from the 3 midwifery centers.

Sex Workers

- In 2020, UNFPA provided integrated SRHR and HIV services to 4,423 female sex workers in eight brothels throughout the country.



We provided integrated SRHR and HIV services to 4,423 female sex workers in eight brothels in the country

- Female sex workers were among the 41,195 women and girls who received life-saving information on GBV response services available in areas affected by severe flooding.

Transgender People

- With UNFPA's support, 2,552 members of Cox's Bazar's transgender and gender diverse populations were either screened or received treatment for sexually transmitted infections, including HIV.
- 661 transgender people received Dignity Kits specifically tailored for their needs in the aftermath of several severe floods that hit Bangladesh in 2020.



661 transgender people received Dignity Kits specifically tailored for their needs in the aftermath of several severe floods that hit Bangladesh in 2020

People with Disabilities

- With UNFPA's technical support, a Standard Operating Procedure (SOP) for health care providers was developed to ensure comprehensive SRHR services, including family planning for people with disabilities and inclusion of disability related activities in the Operational Plan of the 4th HPNSP. This SOP will address family planning needs of people living with disabilities by taking into consideration disability-specific facilitators and barriers for accessing family planning services.
- 677 persons with disabilities accessed GBV prevention and response services provided by 23 UNFPA-supported Women Friendly Spaces in the Rohingya camps and surrounding host communities in Cox's Bazar.
- As part of UNFPA's efforts to provide relief to flood-struck communities in Bangladesh, 1,140 women with disabilities received Dignity Kits to ensure that they could take care of their personal hygiene and protect themselves from gender-based violence.
- 294 flood-affected adolescent girls with disabilities received Menstrual Health Management kits that contained items for taking care of one's hygiene and health during menstruation, as well as information on menstrual health management and GBV referral mechanisms.



677 persons with disabilities accessed GBV prevention and response services provided by 23 UNFPA-supported Women Friendly Spaces in the Rohingya camps and surrounding host communities in Cox's Bazar

Female tea garden workers

- Through our Joint SDG Programme with ILO, UNICEF and UN Women, we continued to provide support to female tea garden workers and their families in Sylhet Division by enhancing their social protection and improving their access to public services, including sexual and reproductive health services. In addition, UNFPA is working to improve reproductive and maternal health services in 35 tea gardens in Moulvibazar through the "Bagan Mayer Jonno" initiative.
- 865 female teagarden workers took part in awareness raising sessions on infection prevention in the context of COVID-19.
- 378 deliveries were performed by skilled, UNFPA supported birth attendants in the teagarden communities.
- 1,813 female workers received antenatal care and 729 postnatal care through UNFPA supported services in the tea gardens.
- 252 women with pregnancy related complications were referred from tea garden facilities to higher-level facilities by professional midwives and tea garden midwives.
- 1,507 tea garden workers received information on how to access social safety net programmes and social services such as family planning through courtyard meetings.
- 1,500 Maternal and Child Health (MCH) handbooks were distributed among pregnant mothers in 35 tea gardens.
- 133 health care providers in the tea gardens were trained on sexual health, women's rights, sexually transmitted infections and HIV, gender based violence and other issues.



I am so happy when I am here, because I get to chat with other girls of my age

- Mohsina, 15, Cox's Bazar



"I wish I could come to the Women Friendly Space every day. But it is not possible since someone needs to come and pick me up in my wheelchair. I am so happy when I am here, because I get to chat with other girls of my age. I could stay all day!"

Today, I was so excited to come and receive the hygiene kit. The kits will be a nice present for me and my two sisters. We will use the items for our daily self-care. I also love the bag. It is really practical, because the fabric is water resistant and I can put my water and clothes inside it!"

Mohsina is a 15-year old, differently abled girl living in the Rohingya camps of Cox's Bazar. In 2020, Mohsina was one of the 25,000 women and girls who received a COVID-19 kit, which UNFPA distributed to curb the spread of the virus in the camps. The kits contain soap, sanitizer, washing powder and other items for maintaining personal hygiene.

The kits were distributed through the 23 UNFPA-supported Women Friendly Spaces in Cox's Bazar, which continued to operate throughout the pandemic in 2020. The Women Friendly Spaces are safe havens for women and girls in humanitarian emergencies, as they provide life skills training, counselling, and support to women to respond to gender-based violence.



OPERATIONS

The Operations team provides back-office support to the overall functions of the Country Office and facilitates the attainment of programme objectives. It plays a critical role in ensuring value for money. It creates an enabling environment where all functional units of the Country Office are well coordinated and follow up on adherence of corporate policies and procedures.

At UNFPA Bangladesh, our Operations Team ensures the smooth functioning and facilitation of all our programmes across the country. Without their role in each stage of the implementation process, our work cannot reach the people we serve in an efficient and impactful manner.

Throughout 2020, the Operations Team helped the UNFPA Country Office, Sub-Office and Field Officers adapt to the unpredictable circumstances of the COVID-19 pandemic. It ensured that essential supplies were able to reach service providers in time and that mobility restrictions and other safety regulations did not prevent us from providing relief to the people of Bangladesh in their time of need.

OUR RESULTS IN 2020

Provides leadership and advice in all aspects of the country office management and operations, finance, administration, procurement and information technology as well as human resources. The main role of Operations unit is to ensure a fully accountable, smoothly functioning, well-managed and results-oriented SRO and to facilitate programme implementation and delivery by providing for the operational needs of programmes and projects. Main activities performed during 2020 include, but not limited to the following:

- Handled revenues amounting US\$ 39.18 million in 2020.
- Managed expenses in the amount of \$38.53 million in 2020.
- Procured Goods and services worth \$ 4.7 million for implementing the national development programme and humanitarian interventions, such as the COVID-19 and Rohingya emergency response. The humanitarian interventions included distribution of reproductive health commodities, medical equipment and personal protective equipment, like masks, gloves, face shields, head-covers, shoe-covers, biohazard bags etc.

Other 2020 accomplishments related to corporate policies and procedures include:

- Implemented corporate systems and applications in support of finance, HR, Procurement, Admin and logistics as well as security and IT. Advised and trained project staff in the application of NEX procedures
- Managed advances and reviewed financial reports of 41 implementing government and non-governmental organization partners
- Commissioned and managed a Harmonized Approach to Cash Transfer (HACT) Audit for 20 implementing partners (3 from government and 17 from non-governmental organizations. In addition, the unit has also facilitated for conducting spot check exercises for 30 implementing partners and also in Remote Audit for 2020.
- Adhered to and provided guidelines for support staff in processing all operations-related transactions and promptly addressed any issues or concerns.
- Coordinated with programmes on Last Mile Assurance (LMA) activities and certifications.



COMMUNICATIONS

Information saves lives. Never has this maxim rang truer than during the COVID-19 pandemic in 2020. With new information coming out about the virus on a daily basis, UNFPA's top priority was ensuring that people in Bangladesh were up to date regarding the developments of the crisis and knew how to act in accordance with health guidelines set by WHO.

To achieve this aim, UNFPA's Communications Team kept developing informational content on the pandemic and distributing it through various channels throughout 2020. The content prepared reached at least a million people in Bangladesh and thus made a crucial contribution to ensuring public health and security amidst the uncertainties posed by the pandemic.

OUR RESULTS IN 2020

As a result of COVID-19, the importance of communications as an integral function within the Country Office was highlighted in 2020. Throughout the year, the Communications Unit supported in ensuring key messages related to the pandemic were duly prepared and disseminated through different channels on a constant basis and in line with WHO's latest guidelines.

In 2020, particularly the following highlights were achieved:

- As part of the Risk Communications and Community Engagement pillar of the National Preparedness and Response Plan for COVID-19, the Communications Unit worked closely with partner organizations (a2i, JHU, UNICEF, WHO) and other units to ensure wider reach and advocacy on UNFPA-mandate related communications in the context of COVID-19
- The Communications team attended and ensured coverage through live-tweets and Facebook updates for almost all events and meetings that took place virtually from mid-March
- Digital posters, infographics, videos and social media content were developed on a daily basis to ensure continued engagement and reach with audiences despite restrictions posed by COVID-19. In total, 453 new pieces of social media content were developed during 2020.



- UNFPA Bangladesh's Facebook and Twitter pages obtained a total of over 11,137 new followers, thus allowing for wider reach and engagement with audiences across Bangladesh.

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